

Applicant or Patentee: David B. Johnson & Jeffrey A. Schmidt
Application or Patent No. Filed Herewith
Confirmation No. Unknown
Filed or Issued: Filed Herewith on 08-06-03
For: CONDIMENT CONTAINER

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b)) -
INDEPENDENT INVENTOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled

described in

the specification filed herewith
 application no. _____
 patent no. _____

I have not assigned, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a nonprofit organization under 37 CFR 1.9 (e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

no such person, concern, or organization
 persons, concerns or organization listed below*

***NOTE: Separate verified statement are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)**

FULL NAME	<u>David B. Johnson</u>		
ADDRESS	<u>576 N. St. Asaph St, Alexandria, VA 22314</u>		
	<input checked="" type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> SMALL BUSINESS CONCERN	<input type="checkbox"/> NONPROFIT ORGANIZATION
FULL NAME	<u>Jeffrey A. Schmidt</u>		
ADDRESS	<u>4808 8th Road North, Arlington, VA 22203</u>		
	<input checked="" type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> SMALL BUSINESS CONCERN	<input type="checkbox"/> NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

David B. Johnson	Jeffrey A. Schmidt	
NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
<u>David B. Johnson</u>	<u>Jeffrey A. Schmidt</u>	
Signature of Inventor	Signature of Inventor	Signature of Inventor

Date August 6, 2003

Date August 6, 2003

Date

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CONDIMENT CONTAINER

the application of which
X is attached hereto

OR

was filed on _____
as United States Application Number or PCT International Application
Number _____
(Confirmation No. _____), and was amended on
_____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part application(s), material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim benefit under 35 United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date

I hereby claim benefit under 35 United States Code §120 of any United States application(s) or §365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a listed prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge my duty to disclose any information material to the patentability of this application as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. or International Application Number(s)

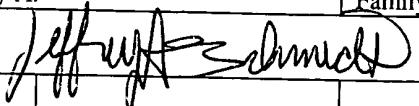
U.S. or International Filing Date

Status

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle [if any]) David B.		Family Name or Surname Johnson	
Inventor's Signature <u>L B. M.</u>		Date August 6, 2003	
Residence: City Alexandria	State VA	Country USA	Citizenship USA
Mailing Address: 576 N. St. Asaph St.			
City Alexandria	State VA	Zip 22314	Country USA

NAME OF SECOND INVENTOR:

Given Name (first and middle [if any]) Jeffrey A.		Family Name or Surname Schmidt	
Inventor's Signature 		Date August 6, 2003	
Residence: City Arlington	State VA	Country USA	Citizenship USA
Mailing Address: 4808 8 th Road North			
City Arlington	State VA	Zip 22203	Country USA
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country